



**Northwestern State University**  
**University Registrar's Office**  
Natchitoches, LA 71497  
Fax Number: (318) 357-5823

**RESIGNATION/CANCELLATION FORM**

**TERM** \_\_\_\_\_

Name of Student \_\_\_\_\_ SS#/CWID \_\_\_\_\_  
Last First Middle/Maiden

Address \_\_\_\_\_  
Street or P.O. Box City State Zip Code

I wish to resign/cancel my registration for the semester indicated above for the following reason(s):

\_\_\_\_\_  
\_\_\_\_\_

I understand that my signed cancellation request for fall/spring must be received prior to the first day of classes (for summer, it must be received no later than the second class day of my first session). If I have missed the cancellation period, I acknowledge that I have a right to appeal my registration depending upon my circumstances and the appeal policy in place at the time of my appeal. I understand that the appeal committee's decision is final.

**VERY IMPORTANT NOTE:** *If you live on campus and to avoid charges to your account, please contact housing (in person or via telephone or email) to finalize the resignation process.*

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date